



Dear Doctor

You have received this letter because your patient has been diagnosed with, or is showing symptoms of lipoedema.

Lipoedema is a poorly understood condition of the fat and connective tissue. It is most common in women and usually starts around puberty. The exact causes of lipoedema are unclear but genetic factors are currently being studied. Lipoedema fat does not respond to dieting, and is sometimes mistaken for 'obesity'. Women may live with lipoedema for many years, believing that they are overweight, before they have a correct diagnosis of lipoedema.

Someone with lipoedema commonly experiences symmetrical enlargement of the legs, buttocks and arms. The tissues are usually soft, bruise easily and may be very tender. Some women develop firm nodules in the tissues, painful joints and a dimpled effect to the skin. Emotional and mental health problems affect many women with lipoedema.

As the condition progresses, the lymphatic system can become compromised, and lymphoedema may occur, leading to poor mobility and risk of cellulitis. However, lipoedema and lymphoedema are two distinct conditions with different causes.

People with lipoedema benefit from good skin care, use of emollients and being fitted with appropriate compression garments. At Talk Lipoedema we also encourage women to seek advice on exercises that suit their individual needs, and the use of an anti-inflammatory diet that helps with managing the symptoms and weight control. Many lymphoedema clinics now treat people with lipoedema, so you may wish to make a referral to a local clinic.

Further information on how to diagnose Lipoedema is available on our website: www.talklipoedema.org

Thank you for your interest in lipoedema.

Best wishes

A handwritten signature in black ink that reads "Isobel MacEwan". The signature is written in a cursive style with a long, sweeping underline.

Isobel MacEwan

Chair

Talk Lipoedema